Q05 MON 21:32 FAX 5032247017 Dellett & Walters US →→→ PTO Issue fee

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

RADEMA			E-	Alexandria, Virg	inia 22313-1450		
INSTRUCTIONS: This fo	rm should be used for team	emitting the 1991	or Fa		and Division I described	Annual to annual state at	
appropriate. All further con indicated unless corrected maintenance fee notification	rrespondence including the l below or directed otherwise ns.	Patent, advance on in Block 1, by (a)	ders and notific) specifying a r	JBLICATION FEE (if requiration of maintenance fees where correspondence address;	rill be mailed to the current and/or (b) indicating a sep	correspondence address as arate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any shange of address)				Fee(s) Transmittal. Th	Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
.802 7590 06/08/2005				have its own certificate	of mailing or transmission.	cur of lostnes crewing, must	
DELLETT AND	WALTERS			Cer	tificate of Mailing or Trans	eoissimu	
P. O. BOX 2786 PORTLAND, OR 97208-2786				I hereby certify that the States Postal Service vaddressed to the Mail	is Fee(s) Transmittal is bein with sufficient postage for fir I Stop ISSUE FEE address TO (703) 746-4000, on the	g deposited with the United ast class mail in an envelope above, or being facsimile	
				Japaés H.		(Depositor's manue)	
				Jun	the July	(Signature)	
		i		Aug. 29, 2	005	(Dute)	
APPLICATION NO.	FILING DATE	FIRST NAMED INVE		NVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/650,239	08/27/2003 Hua-Chi			Pang	T-1254	6390	
APPLN. TYPE	SMALL ENTITY	ISSUE FE		EMBLY FOR A MACHINE PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
lanoisivorquon	YES	\$700		0062	\$1000	09/08/2005	
EXAM	AINER	ART UNIT		CLASS-SUBCLASS			
ROSS,	DANA	3722		409-216000			
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attempts or agents OR, alternatively, (2) the names of up to 3 registered patent attempts (3) Dellett & Walters				
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
	RESIDENCE DATA TO B						
recordation as set forth in	s an assignee is identified be a 37 CFR 3.11. Completion	low, no assignee of this form is NOT	data will eppear Fa substitute for	r on the patent. If an assign r filing an assignment,	ee is identified below, the	document has been filed for	
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
KSP TECHNOLOGIES CORP.			TANTZE HSIANG, TAICHUNG HSIEN, TAIWAN R.O.C.				
Please check the appropriate	assignee category or catego	ries (will not be pri	inted on the pate	ent): 🗖 Individual 💥 Co	orporation or other private gr	coup entity Government	
4a. The following fee(s) are	caclosed:	4b.	Payment of Fe	:=(s);			
				n the amount of the fee(s) is enclosed. by credit card. Form PTO-2038 is attached.			
Advance Order - # of Copies			The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 503038 (enclose an extra copy of this form).				
	(from status indicated above)	_				
The Director of the USPTO NOTE: The Issue Fee and P	MALL ENTITY status. See is requested to apply the Issu ublication Fee (if required) v	re Fee and Publicate	ion Fee (if any)	t is no longer claiming SMA or to re-apply any previousl ther than the applicant; a regi	LL ENTITY status. See 37 C y paid issue fee to the applic stened attorney or accept; or t	EFR 1.27(g)(2). stion identified above. he assigned or other party in	
	ords of the United States Patr	ent and Trademark	Office.	· · · · · · · · · · · · · · · · · · ·			
Authorized Signature	James H. Walter	-am	<u>~</u>	Date At	ıg. 29, 2005		
Typed or printed forme James H. Walters Registration No. 35,731							
				obtain or retain a benefit by te tion is estimated to take 12 to the individual case. Any co tion Officer, U.S. Patent and ORMS TO THIS ADDRESS			
Order are Labelmork Medite	400 Act of 1995, no persons	are required to resp	pond to a collec	tion of information unless it	displays a valid OMB contro	l number.	
PTOL-85 (Rev. 12/04) App HDEMESS2 00000063	roved for use through 04/30/ 10650239	2007.	OMB 0651-	0033 U.S. Patent and Trad	demark Office; U.S. DEPAR	TMENT OF COMMERCE	

08/30/2005

01 FC:2501 02 FC:1504

700.00 OP 300.00 OP



DELLETT AND WALTERS

PATENT AND TRADEMARK LAW

P.O. BOX 2786

1224 S.E. MALDEN STREET

PORTLAND, OREGON 97208-2786 PORTLAND, OREGON 97202-6938

PORTLAND, OREGON 97204-2304 U.S.A.

JAMES H. WALTERS* JOHN P. DELLETT* OF COUNSEL

TELEPHONE (503) 224-0115 FAX (503) 224-7017 ents@onemain.com Registered Patent Attorne

FACSIMILE COVER LETTER

PLEASE DELIVER THE FOLLOWING PAGES TO:

NAME:	Mail Stop Issue Fee
FAX NO:	703-746-4000
LOCATION	U.S. Patent and Trademark Office
PHONE NO	•
FROM:	James H. Walters
	WE ARE TRANSMITTING A TOTAL OF PAGES INCLUDING THIS COVER LETTER
DATE: Aug	gust 29, 2005 TIME: 9)5 P
	Our ref: T-1254 Your ref: 10/650,239

IF YOU DO NOT RECEIVE ALL THE PAGES, PLEASE CALL BACK AS SOON AS POSSIBLE AT (503) 224-0115

THIS MESSAGE IS A PRIVILEGED AND CONFIDENTIAL COMMUNICATION FOR THE EXCLUSIVE USE OF THE ADDRESSEE. IT IS NOT TO BE COPIED OR DISSEMINATED. IF YOU HAVE RECEIVED IT IN ERROR, PLEASE CALL US IMMEDIATELY, COLLECT IF NECESSARY, AT (503) 224-0115.

Enclosed please find issue fee transmittal, deposit account charge authorization or credit card payment form for the issue fee (\$700) and publication fee (\$300), and the certificate of facsimile transmission.

Certification of Facsimile Transmission I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office on this day 2005.

H. Walters

. No. 35,731